TurningPoint Cardiac Expansion

Market: Ohio LOB(s): Medicaid, Medicare, Marketplace, MMP

Eff. Date: 8/1/25

| Procedure | Code | Description | Code Type | To be managed by TP | Comments |
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| Coronary Artery Bypass Grafting | 33517 | CORONARY ARTERY BYPASS, USING VENOUS GRAFT(S) AND ARTERIAL GRAFT(S); SINGLE VEIN GRAFT (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE) | CPT | Yes | |
| Coronary Artery Bypass Grafting | 33518 | CORONARY ARTERY BYPASS, USING VENOUS GRAFT(S) AND ARTERIAL GRAFT(S); 2 VENOUS GRAFTS (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE) | CPT | Yes | |
| Coronary Artery Bypass Grafting | 33519 | CORONARY ARTERY BYPASS, USING VENOUS GRAFT(S) AND ARTERIAL GRAFT(S); 3 VENOUS GRAFTS (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE) | CPT | Yes | |
| Coronary Artery Bypass Grafting | 33521 | CORONARY ARTERY BYPASS, USING VENOUS GRAFT(S) AND ARTERIAL GRAFT(S); 4 VENOUS GRAFTS (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE) | CPT | Yes | |
| Coronary Artery Bypass Grafting | 33522 | CORONARY ARTERY BYPASS, USING VENOUS GRAFT(S) AND ARTERIAL GRAFT(S); 5 VENOUS GRAFTS (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE) | CPT | Yes | |
| Coronary Artery Bypass Grafting | 33523 | CORONARY ARTERY BYPASS, USING VENOUS GRAFT(S) AND ARTERIAL GRAFT(S); 6 OR MORE VENOUS GRAFTS (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE) | CPT | Yes | |
| Coronary Artery Bypass Grafting | 33530 | REOPERATION, CORONARY ARTERY BYPASS PROCEDURE OR VALVE PROCEDURE, MORE THAN 1 MONTH AFTER ORIGINAL OPERATION (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE) | CPT | Yes | |
| Coronary Artery Bypass Grafting | 33533 | CORONARY ARTERY BYPASS, USING ARTERIAL GRAFT(S); SINGLE ARTERIAL GRAFT | CPT | Yes | |
| Coronary Artery Bypass Grafting | 33534 | CORONARY ARTERY BYPASS, USING ARTERIAL GRAFT(S); 2 CORONARY ARTERIAL GRAFTS | CPT | Yes | |
| Coronary Artery Bypass Grafting | 33535 | CORONARY ARTERY BYPASS, USING ARTERIAL GRAFT(S); 3 CORONARY ARTERIAL GRAFTS | CPT | Yes | |
| Coronary Artery Bypass Grafting | 33536 | CORONARY ARTERY BYPASS, USING ARTERIAL GRAFT(S); 4 OR MORE CORONARY ARTERIAL GRAFTS | CPT | Yes | |
| Coronary Artery Bypass Grafting | 33572 | CORONARY ENDARTERECTOMY, OPEN, ANY METHOD, OF LEFT ANTERIOR DESCENDING, CIRCUMFLEX, OR RIGHT CORONARY ARTERY PERFORMED IN CONJUNCTION WITH CORONARY ARTERY BYPASS GRAFT PROCEDURE, EACH VESSEL (LIST SEPARATELY IN ADDITION TO PRIMARY PROCEDURE) | CPT | Yes | |
| Coronary Artery Bypass Grafting | 4110F | INTERNAL MAMMARY ARTERY GRAFT PERFORMED FOR PRIMARY, ISOLATED CORONARY ARTERY BYPASS GRAFT PROCEDURE (CABG) | CPT | Yes | |
| Coronary Artery Bypass Grafting | S2205 | MINIMALLY INVASIVE DIRECT CORONARY ARTERY BYPASS SURGERY INVOLVING MINI-THORACOTOMY OR MINI- STERNOTOMY SURGERY, PERFORMED UNDER DIRECT VISION; USING ARTERIAL GRAFT(S), SINGLE CORONARY ARTERIAL GRAFT | HCPCS | Yes | |
| Coronary Artery Bypass Grafting | S2206 | MINIMALLY INVASIVE DIRECT CORONARY ARTERY BYPASS SURGERY INVOLVING MINI-THORACOTOMY OR MINI- STERNOTOMY SURGERY, PERFORMED UNDER DIRECT VISION; USING ARTERIAL GRAFT(S), TWO CORONARY ARTERIAL GRAFTS | HCPCS | Yes | |
| Coronary Artery Bypass Grafting | S2207 | MINIMALLY INVASIVE DIRECT CORONARY ARTERY BYPASS SURGERY INVOLVING MINI-THORACOTOMY OR MINI- STERNOTOMY SURGERY, PERFORMED UNDER DIRECT VISION; USING TWO ARTERIAL GRAFTS AND SINGLE VENOUS GRAFT | HCPCS | Yes | |
| Coronary Artery Bypass Grafting | S2208 | MINIMALLY INVASIVE DIRECT CORONARY ARTERY BYPASS SURGERY INVOLVING MINI-THORACOTOMY OR MINI- STERNOTOMY SURGERY, PERFORMED UNDER DIRECT VISION; USING SINGLE ARTERIAL AND VENOUS GRAFT(S), SINGLE VENOUS GRAFT | HCPCS | Yes | |
| Coronary Artery Bypass Grafting | S2209 | MINIMALLY INVASIVE DIRECT CORONARY ARTERY BYPASS SURGERY INVOLVING MINI-THORACOTOMY OR MINI- STERNOTOMY SURGERY, PERFORMED UNDER DIRECT VISION; USING TWO ARTERIAL GRAFTS AND SINGLE VENOUS GRAFT | HCPCS | Yes | |
| Internal Cardiac Monitoring | 33285 | Insertion, subcutaneous cardiac rhythm monitor, including programming | CPT | Yes | |
| Internal Cardiac Monitoring | 33286 | Removal, subcutaneous cardiac rhythm monitor | CPT | Yes | |
| Internal Cardiac Monitoring | C1764 | Event recorder, cardiac (implantable) | HCPCS | Yes | |
| Internal Cardiac Monitoring | E0616 | Implantable cardiac event recorder with memory, activator and programmer | HCPCS | Yes | |
| Percutaneous Left Atrial Appendage Occluder | 33340 | PERCUTANEOUS TRANSCATHETER CLOSURE OF THE LEFT ATRIAL APPENDAGE WITH ENDOCARDIAL IMPLANT, INCLUDING FLUOROSCOPY, TRANSSEPTAL PUNCTURE, CATHETER PLACEMENT(S), LEFT ATRIAL ANGIOGRAPHY, LEFT ATRIAL APPENDAGE ANGIOGRAPHY, WHEN PERFORMED, AND RADIOLOGICAL SUPERVISION AND INTERPRETATION | CPT | Yes | |
| Peripheral Revascularization | 35302 | TEAEC W/GRAFT SUPERFICIAL FEMORAL ARTERY | CPT | Yes | |
| Peripheral Revascularization | 35303 | TEAEC W/GRAFT POPLITEAL ARTERY | CPT | Yes | |
| Peripheral Revascularization | 35304 | THROMBOENDARTERECTOMY, INCLUDING PATCH GRAFT, IF PERFORMED; TIBIOPERONEAL TRUNK ARTERY | CPT | Yes | |
| Peripheral Revascularization | 35305 | TEAEC W/GRAFT TIBIAL/PERONEAL ART 1ST VESSEL | CPT | Yes | |
| Peripheral Revascularization | 35371 | THROMBOENDARTERECTOMY, INCLUDING PATCH GRAFT, IF PERFORMED; COMMON FEMORAL | CPT | Yes | |

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| Peripheral Revascularization | 35372 | THROMBOENDARTERECTOMY, INCLUDING PATCH GRAFT, IF PERFORMED; DEEP (PROFUNDA) FEMORAL | CPT | Yes | |
| Peripheral Revascularization | 35556 | BYPASS W/VEIN FEMORAL-POPLITEAL | CPT | Yes | |
| Peripheral Revascularization | 35558 | BYPASS W/VEIN FEMORAL-FEMORAL | CPT | Yes | |
| Peripheral Revascularization | 35566 | BYP FEM-ANT TIBL PST TIBL PRONEAL ART/OTH DSTL | CPT | Yes | |
| Peripheral Revascularization | 35571 | BYP W/VEIN POP-TIBL-PRONEAL ART/OTH DSTL VSL | CPT | Yes | |
| Peripheral Revascularization | 35583 | IN-SITU VEIN BYPASS; FEMORAL-POPLITEAL | CPT | Yes | |
| Peripheral Revascularization | 35585 | IN-SITU VEIN BYPASS; FEMORAL-ANTERIOR TIBIAL, POSTERIOR TIBIAL, OR PERONEAL ARTERY | CPT | Yes | |
| Peripheral Revascularization | 35587 | IN-SITU VEIN BYPASS; POPLITEAL-TIBIAL, PERONEAL | CPT | Yes | |
| Peripheral Revascularization | 35656 | BYP OTH/THN VEIN FEMORAL-POPLITEAL | CPT | Yes | |
| Peripheral Revascularization | 35661 | BYPASS GRAFT, WITH OTHER THAN VEIN; FEMORAL-FEMORAL | CPT | Yes | |
| Peripheral Revascularization | 35666 | BYPASS GRAFT, WITH OTHER THAN VEIN; FEMORAL-ANTERIOR TIBIAL, POSTERIOR TIBIAL, OR PERONEAL ARTERY | CPT | Yes | |
| Peripheral Revascularization | 35671 | BYP OTH/THN VEIN POPLITEAL-TIBIAL/-PERONEAL ART | CPT | Yes | |
| Peripheral Revascularization | 35700 | REOPERATION, FEMORAL-POPLITEAL OR FEMORAL (POPLITEAL)-ANTERIOR TIBIAL, POSTERIOR TIBIAL, PERONEAL ARTERY, OR OTHER DISTAL VESSELS, MORE THAN 1 MONTH AFTER ORIGINAL OPERATION (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE) | СРТ | Yes | |
| Peripheral Revascularization | 35881 | REVISION, LOWER EXTREMITY ARTERIAL BYPASS, WITHOUT THROMBECTOMY, OPEN; WITH SEGMENTAL VEIN INTERPOSITION | CPT | Yes | |
| Peripheral Revascularization | 35883 | REVISION, FEMORAL ANASTOMOSIS OF SYNTHETIC ARTERIAL BYPASS GRAFT IN GROIN, OPEN; WITH NONAUTOGENOUS PATCH GRAFT (EG, DACRON, EPTFE, BOVINE PERICARDIUM) | СРТ | Yes | |
| Peripheral Revascularization | 35884 | REVISION, FEMORAL ANASTOMOSIS OF SYNTHETIC ARTERIAL BYPASS GRAFT IN GROIN, OPEN; WITH AUTOGENOUS VEIN PATCH GRAFT | CPT | Yes | |
| Peripheral Revascularization | 37220 | Revascularization, endovascular, open or percutaneous, iliac artery, unilateral, initial vessel; with transluminal angioplasty | CPT | Yes | |
| Peripheral Revascularization | 37221 | Revascularization, endovascular, open or percutaneous, iliac artery, unilateral, initial vessel; with transluminal stent placement(s), includes angioplasty within the same vessel, when performed | CPT | Yes | |
| Peripheral Revascularization | 37224 | REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, FEMORAL, POPLITEAL ARTERY(S), UNILATERAL; WITH TRANSLUMINAL ANGIOPLASTY | CPT | Yes | |
| Peripheral Revascularization | 37225 | REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, FEMORAL, POPLITEAL ARTERY(S), UNILATERAL; WITH ATHERECTOMY, INCLUDES ANGIOPLASTY WITHIN THE SAME VESSEL, WHEN PERFORMED | CPT | Yes | |
| Peripheral Revascularization | 37226 | REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, FEMORAL, POPLITEAL ARTERY(S), UNILATERAL; WITH TRANSLUMINAL STENT PLACEMENT(S), INCLUDES ANGIOPLASTY WITHIN THE SAME VESSEL, WHEN PERFORMED | CPT | Yes | |
| Peripheral Revascularization | 37227 | REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, FEMORAL, POPLITEAL ARTERY(S), UNILATERAL; WITH TRANSLUMINAL STENT PLACEMENT(S) AND ATHERECTOMY, INCLUDES ANGIOPLASTY WITHIN THE SAME VESSEL, WHEN PERFORMED | СРТ | Yes | |
| Peripheral Revascularization | 37228 | REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, TIBIAL, PERONEAL ARTERY, UNILATERAL, INITIAL VESSEL; WITH TRANSLUMINAL ANGIOPLASTY | CPT | Yes | |
| Peripheral Revascularization | 37229 | REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, TIBIAL, PERONEAL ARTERY, UNILATERAL, INITIAL VESSEL; WITH ATHERECTOMY, INCLUDES ANGIOPLASTY WITHIN THE SAME VESSEL, WHEN PERFORMED | СРТ | Yes | |
| Peripheral Revascularization | 37230 | REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, TIBIAL, PERONEAL ARTERY, UNILATERAL, INITIAL VESSEL; WITH TRANSLUMINAL STENT PLACEMENT(S), INCLUDES ANGIOPLASTY WITHIN THE SAME VESSEL, WHEN PERFORMED | CPT | Yes | |
| Peripheral Revascularization | 37231 | REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, TIBIAL, PERONEAL ARTERY, UNILATERAL, INITIAL VESSEL; WITH TRANSLUMINAL STENT PLACEMENT(S) AND ATHERECTOMY, INCLUDES ANGIOPLASTY WITHIN THE SAME VESSEL, WHEN PERFORMED | СРТ | Yes | |
| Peripheral Revascularization | 37232 | TIBPER REVASC ADD-ON | CPT | Yes | |
| Peripheral Revascularization | 37233 | TIBPER REVASC WATHER ADD-ON | CPT | Yes | |
| Peripheral Revascularization | 37234 | REVSC OPNPRQ TIBPERO STENT | CPT | Yes | |
| Peripheral Revascularization | 37235 | TIBPER REVASC STNT & ATHER | CPT | Yes | |
| Peripheral Revascularization | C2623 | CATHETER TRNSLUM ANGPLASTY DRUG-COATED NON-LASER | HCPCS | Yes | |
| Valve Replacement | 33361 | TRANSCATHETER AORTIC VALVE REPLACEMENT (TAVR/TAVI) WITH PROSTHETIC VALVE; PERCUTANEOUS FEMORAL ARTERY APPROACH | СРТ | Yes | |
| Valve Replacement | 33362 | TRANSCATHETER AORTIC VALVE REPLACEMENT (TAVR/TAVI) WITH PROSTHETIC VALVE; OPEN FEMORAL ARTERY APPROACH | CPT | Yes | |
| Valve Replacement | 33363 | TRANSCATHETER AORTIC VALVE REPLACEMENT (TAVR/TAVI) WITH PROSTHETIC VALVE; OPEN AXILLARY ARTERY APPROACH | СРТ | Yes | |

| Valve Replacement | 33364 | TRANSCATHETER AORTIC VALVE REPLACEMENT (TAVR/TAVI) WITH PROSTHETIC VALVE; OPEN ILIAC ARTERY APPROACH | CPT | Yes | |
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| Valve Replacement | 33365 | TRANSCATHETER AORTIC VALVE REPLACEMENT (TAVR/TAVI) WITH PROSTHETIC VALVE; TRANSAORTIC APPROACH (EG, MEDIAN STERNOTOMY, MEDIASTINOTOMY) | CPT | Yes | |
| Valve Replacement | 33366 | TRANSCATHETER AORTIC VALVE REPLACEMENT (TAVR/TAVI) WITH PROSTHETIC VALVE; TRANSAPICAL EXPOSURE (EG, LEFT THORACOTOMY) | CPT | Yes | |
| Valve Replacement | 33367 | TRANSCATHETER AORTIC VALVE REPLACEMENT (TAVR/TAVI) WITH PROSTHETIC VALVE; CARDIOPULMONARY BYPASS SUPPORT WITH PERCUTANEOUS PERIPHERAL ARTERIAL AND VENOUS CANNULATION (EG, FEMORAL VESSELS) (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE) | CPT | Yes | |
| Valve Replacement | 33368 | TRANSCATHETER AORTIC VALVE REPLACEMENT (TAVR/TAVI) WITH PROSTHETIC VALVE; CARDIOPULMONARY BYPASS SUPPORT WITH OPEN PERIPHERAL ARTERIAL AND VENOUS CANNULATION (EG, FEMORAL, ILIAC, AXILLARY VESSELS) (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE) | CPT | Yes | |
| Valve Replacement | 33369 | TRANSCATHETER AORTIC VALVE REPLACEMENT (TAVR/TAVI) WITH PROSTHETIC VALVE; CARDIOPULMONARY BYPASS SUPPORT WITH CENTRAL ARTERIAL AND VENOUS CANNULATION (EG, AORTA, RIGHT ATRIUM, PULMONARY ARTERY) (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE) | СРТ | Yes | |
| Valve Replacement | 33405 | REPLACEMENT, AORTIC VALVE, WITH CARDIOPULMONARY BYPASS; WITH PROSTHETIC VALVE OTHER THAN HOMOGRAFT OR STENTLESS VALVE | CPT | Yes | |
| Valve Replacement | 33406 | REPLACEMENT, AORTIC VALVE, WITH CARDIOPULMONARY BYPASS; WITH ALLOGRAFT VALVE (FREEHAND) | CPT | Yes | |
| Valve Replacement | 33410 | REPLACEMENT, AORTIC VALVE, WITH CARDIOPULMONARY BYPASS; WITH STENTLESS TISSUE VALVE | CPT | Yes | |
| Valve Replacement | 33411 | REPLACEMENT, AORTIC VALVE; WITH AORTIC ANNULUS ENLARGEMENT, NONCORONARY SINUS | CPT | Yes | |
| Valve Replacement | 33412 | REPLACEMENT, AORTIC VALVE; WITH TRANSVENTRICULAR AORTIC ANNULUS ENLARGEMENT (KONNO PROCEDURE) | CPT | Yes | |
| Valve Replacement | 33413 | REPLACEMENT, AORTIC VALVE; BY TRANSLOCATION OF AUTOLOGOUS PULMONARY VALVE WITH ALLOGRAFT REPLACEMENT OF PULMONARY VALVE (ROSS PROCEDURE) | CPT | Yes | |
| Valve Replacement | 33418 | TRANSCATHETER MITRAL VALVE REPAIR, PERCUTANEOUS APPROACH, INCLUDING TRANSSEPTAL PUNCTURE WHEN PERFORMED; INITIAL PROSTHESIS | CPT | Yes | |
| Valve Replacement | 33419 | TRANSCATHETER MITRAL VALVE REPAIR, PERCUTANEOUS APPROACH, INCLUDING TRANSSEPTAL PUNCTURE WHEN PERFORMED; ADDITIONAL PROSTHESIS(ES) DURING SAME SESSION (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE) | СРТ | Yes | |
| Valve Replacement | 33430 | REPLACEMENT, MITRAL VALVE, WITH CARDIOPULMONARY BYPASS | CPT | Yes | |
| Valve Replacement | 33440 | REPLACEMENT, AORTIC VALVE; BY TRANSLOCATION OF AUTOLOGOUS PULMONARY VALVE AND TRANSVENTRICULAR AORTIC ANNULUS ENLARGEMENT OF THE LEFT VENTRICULAR OUTFLOW TRACT WITH VALVED CONDUIT REPLACEMENT OF PULMONARY VALVE (ROSS-KONNO PROCEDURE) | CPT | Yes | |
| Valve Replacement | 33465 | REPLACEMENT, TRICUSPID VALVE, WITH CARDIOPULMONARY BYPASS | CPT | Yes | |
| Valve Replacement | 33475 | REPLACEMENT, PULMONARY VALVE | CPT | Yes | |
| Valve Replacement | 33477 | TRANSCATHETER PULMONARY VALVE IMPLANTATION, PERCUTANEOUS APPROACH, INCLUDING PRE-STENTING OF THE VALVE DELIVERY SITE, WHEN PERFORMED | CPT | Yes | |
| Valve Replacement | 0483T | TRANSCATHETER MITRAL VALVE IMPLANTATION/REPLACEMENT (TMVI) WITH PROSTHETIC VALVE; PERCUTANEOUS APPROACH, INCLUDING TRANSSEPTAL PUNCTURE, WHEN PERFORMED | CPT | Yes | |
| Valve Replacement | 0484T | TRANSCATHETER MITRAL VALVE IMPLANTATION/REPLACEMENT (TMVI) WITH PROSTHETIC VALVE; TRANSTHORACIC EXPOSURE (EG, THORACOTOMY, TRANSAPICAL) | CPT | Yes | |
| Wearable Cardiac Defibrillator | 93745 | SET-UP CARDIOVERT-DEFIBRILL | CPT | Yes | Market noted they want to manage this internally - confirm, for all LOBS? |
| Wearable Cardiac Defibrillator | K0606 | AED GARMENT W ELEC ANALYSIS | HCPCS | Yes | Market noted they want to manage this internally - confirm, for all LOBS? |
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